Survey	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden
Child Welfare Child Health Child Mental Health Medicaid	93 93 93 41	1 1 1 1	93 93 93 41	4 2.5 2.5 4	372 232 232 164
Total			320		1000

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Wendy A. Taylor, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: June 15, 1999.

#### Jane Harrison.

Director, Division of Policy Review and Coordination.

[FR Doc. 99–15663 Filed 6–18–99; 8:45 am] BILLING CODE 4160–15–U

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### **National Institutes of Health**

### Submission for OMB Review; Comment Request; Physician Survey on Genetic Testing

Summary: Under the provisions of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the National Cancer Institute (NCI), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the Federal Register on January 5, 1999, page 519–520 and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment

Proposed Collection: Title: Physician Survey on Genetic Testing. Type of Information Request: New. Need and Use of Information Collection: The Physicians Survey on Genetic Testing will be used by the National Cancer Institute to establish baseline information on the prevalence of genetic testing for cancer susceptibility among primary care physicians in the United States. The survey will assess whether there are statistically significant differences in (1) self-reported knowledge, current use of, and future intentions to use genetic testing for cancer susceptibility, and (2)

perceptions of barriers to testing, among primary care physicians by their type and location of practice, and recency of training. Primary care physicians (internists, pediatricians, family and general practitioners) will also be compared with specialty groups (gastroenterologists, surgeons, urologists and oncologists) with respect to their use, attitudes toward, and knowledge of, genetic testing for cancer susceptibility. A questionnaire will be administered by mail, telephone, facsimile and Internet, using a nationally representative sample of physicians. The study physicians will select their preferred response mode. Frequency of Response: One-time study. Affected Public: Medical Community. Type of Respondents: Primary care and speciality physicians with active licenses to practice medicine in the U.S. The annual reporting burden is as follows: Estimated Number of Respondents: 1,350; Estimated Number of Responses per Respondent: 1; Average Burden Hours per Response: .250 and Estimated Total Annual Burden Hours Requested; 338. The annualized cost to respondents is estimated at: \$25,313. There are no Capital Costs, Operating Costs, and/or Maintenance Costs to report.

Request for Comments: Written comments and/or suggestions from the public and affected agencies should address one or more of the following points: (1) Evaluate whether the proposed collection of information is necessary for the performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms on information technology.

Direct Comments to OMB: Written comments and/or suggestions regarding

the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Louise Wideroff or Andrew Freedman, Epidemiologists, National Cancer Institute, EPN 313, Executive Boulevard MSC 7334, Bethesda, Maryland 20892– 7344, Telephone (301) 435-6823 or (301) 435–6819, FAX (301) 435–3710, or E-mail your request, including your address to wideroff@nih.gov or Andrew\_\_Freedman@nih.gov.

Comments Due Date: Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

Dated: June 11, 1999.

#### Reesa L. Nichols,

NCI Project Clearance Liaison. [FR Doc. 99–15636 Filed 6–18–99; 8:45 am] BILLING CODE 4140–01–M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### **National Institutes of Health**

National Cancer Institute: Opportunity for a Cooperative Research and Development Agreement (CRADA) for the Research and Development of Software for Managing Distributed Knowledgebases Consisting of Large Numbers of Object of Diverse Categories Spanning Administrative, Scientific and Other Knowledge Domains

The National Cancer Institute (NCI) has extended the deadline for submission of written notices and proposals regarding the CRADA opportunity described in the **Federal Register** Notice number 74, volume 64, page 19183, dated April 19, 1999.